

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

ADDRESS (number and street)

1800 North Kent Street

Suite 1070

☐Check if different
than previously
reported. (ACC)

Arlington

VA

22209

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00332296

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☒July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2009

through

06

30

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Frank Cannon

Signature of Treasurer

Electronically Filed by Frank Cannon

Date

07

30

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

A. Form/Schedule : **F3X**

Transaction ID :

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

3 / 20

Write or Type Committee Name

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2009		132051.35
(b) Cash on Hand at Beginning of Reporting Period	132051.35	
(c) Total Receipts (from Line 19)	135.00	135.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	132186.35	132186.35
7. Total Disbursements (from Line 31)	100667.58	100667.58
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	31518.77	31518.77
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

4 / 20

Write or Type Committee Name

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	1	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	6	0	3	2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	135.00	135.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	135.00	135.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	135.00	135.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	135.00	135.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	135.00	135.00

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	683.90	683.90	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	683.90	683.90	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	625.00	625.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	-261.00	-261.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	-261.00	-261.00	
29. Other Disbursements.....	99619.68	99619.68	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	100667.58	100667.58	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	100667.58	100667.58	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	135.00	135.00
34. Total Contribution Refunds (from Line 28(d))	-261.00	-261.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	396.00	396.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	683.90	683.90
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	683.90	683.90

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 20

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Merchant e-Solutions	Transaction ID: V477953410642801298d Date of Disbursement																				
Mailing Address P.O. Box 13305	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	2		2	0	0	9												
<table border="1"> <tr> <td>City Spokane</td> <td>State WA</td> <td>Zip Code 99213-3305</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Credit Card Processing Fee</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Spokane	State WA	Zip Code 99213-3305	Purpose of Disbursement Credit Card Processing Fee		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>35.00</div>												
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State: District:																					
B. Full Name (Last, First, Middle Initial) Merchant e-Solutions	Transaction ID: V9f01c192376f3585bd0 Date of Disbursement																				
Mailing Address P.O. Box 13305	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	2		2	0	0	9
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State: District:																					
C. Full Name (Last, First, Middle Initial) Merchant e-Solutions	Transaction ID: V721bca4fb6554939eb2 Date of Disbursement																				
Mailing Address P.O. Box 13305	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	0	9												
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<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					

SUBTOTAL of Disbursements This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.

Full Name (Last, First, Middle Initial)

Merchant e-Solutions

Mailing Address P.O. Box 13305

City
Spokane

State
WA

Zip Code
99213-3305

Purpose of Disbursement
Credit Card Processing

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: V3e7dc2329848617571c

Date of Disbursement

04 / 01 / 2009

Amount of Each Disbursement this Period

35.00

B.

Full Name (Last, First, Middle Initial)

Merchant e-Solutions

Mailing Address P.O. Box 13305

City
Spokane

State
WA

Zip Code
99213-3305

Purpose of Disbursement
Credit Card Processing

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: V20b55d7b1a9ff88a813

Date of Disbursement

05 / 04 / 2009

Amount of Each Disbursement this Period

35.00

C.

Full Name (Last, First, Middle Initial)

Merchant e-Solutions

Mailing Address P.O. Box 13305

City
Spokane

State
WA

Zip Code
99213-3305

Purpose of Disbursement
Credit Card Processing

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: Va4c8037c153b8497e0b

Date of Disbursement

05 / 04 / 2009

Amount of Each Disbursement this Period

35.00

SUBTOTAL of Disbursements This Page (optional)

105.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 / 20

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Merchant e-Solutions	Transaction ID: Vdbb298ed23313acad60 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 9
	Mailing Address P.O. Box 13305	
	City Spokane State WA Zip Code 99213-3305 Purpose of Disbursement Credit Card Processing Fee Candidate Name	Amount of Each Disbursement this Period 35.00
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) Merchant e-Solutions	Transaction ID: Vf4df3c0adcdd7f9083e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 9
	Mailing Address P.O. Box 13305	
	City Spokane State WA Zip Code 99213-3305 Purpose of Disbursement Credit Card Processing Candidate Name	Amount of Each Disbursement this Period 35.00
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) Ning	Transaction ID: V9400ff41b23d0ed7ed6 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 9
	Mailing Address 735 Emerson St.	
	City Palo Alto State CA Zip Code 94301 Purpose of Disbursement Website Fee Candidate Name	Amount of Each Disbursement this Period 32.85
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)		102.85
TOTAL This Period (last page this line number only)		312.85

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.	Full Name (Last, First, Middle Initial) Bachmann for Congress	Transaction ID: 63f5255fa5bd96e74ac Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 9
	Mailing Address PO Box 25950	
	City Woodbury State MN Zip Code 55125	Amount of Each Disbursement this Period
	Purpose of Disbursement 2010 Primary	2000.00
	Candidate Name Michele M. Bachmann	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MN District: 06	
B.	Full Name (Last, First, Middle Initial) Committee To Reelect Congressman Chris Smith	Transaction ID: 7de229fdd8562236a70 Date of Disbursement
	Mailing Address PO Box 3184	M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 9
	City Hamilton State NJ Zip Code 08619	Amount of Each Disbursement this Period
	Purpose of Disbursement 2010 Primary	1500.00
	Candidate Name Christopher H. Smith	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 04	
C.	Full Name (Last, First, Middle Initial) Elizabeth Dole Committee Inc	Transaction ID: b6aaa573b67bb82a097 Date of Disbursement
	Mailing Address PO Box 2918	M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 9
	City Raleigh State NC Zip Code 27602	Amount of Each Disbursement this Period
	Purpose of Disbursement Uncashed 3/27/08 Contribution	-100.00
	Candidate Name Elizabeth Dole	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District:	
SUBTOTAL of Disbursements This Page (optional)		3400.00
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Graves for Congress	Transaction ID: b6a4ad6b385c3da0706 Date of Disbursement																				
Mailing Address 2345 Grand, Suite 2400	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	6		2	0	0	9												
City Kansas City State MO Zip Code 64108	Amount of Each Disbursement this Period																				
Purpose of Disbursement Uncashed 7/16/2008 Contribution	<table border="1"> <tr> <td colspan="10">-280.00</td> </tr> </table>	-280.00																			
-280.00																					
Candidate Name Samuel B. Graves, Jr.	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Graves for Congress	Transaction ID: fe8315dd011a163fc93 Date of Disbursement																				
Mailing Address 2345 Grand, Suite 2400	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	6		2	0	0	9												
City Kansas City State MO Zip Code 64108	Amount of Each Disbursement this Period																				
Purpose of Disbursement Uncashed 7/24/08 Contribution	<table border="1"> <tr> <td colspan="10">-35.00</td> </tr> </table>	-35.00																			
-35.00																					
Candidate Name Samuel B. Graves, Jr.	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Graves for Congress	Transaction ID: 32b8c0cd44d52aea672 Date of Disbursement																				
Mailing Address 2345 Grand, Suite 2400	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	6		2	0	0	9												
City Kansas City State MO Zip Code 64108	Amount of Each Disbursement this Period																				
Purpose of Disbursement Uncashed 8/8/08 Contribution	<table border="1"> <tr> <td colspan="10">-5.00</td> </tr> </table>	-5.00																			
-5.00																					
Candidate Name Samuel B. Graves, Jr.	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

-320.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.

Full Name (Last, First, Middle Initial)

Graves for Congress

Mailing Address 2345 Grand, Suite 2400

City Kansas City State MO Zip Code 64108

Purpose of Disbursement
Uncashed 10/27/08 Contribution

Candidate Name
Samuel B. Graves, Jr.

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MO District: 06

Transaction ID: ad5842e09400afe170d

Date of Disbursement

04 / 16 / 2009

Amount of Each Disbursement this Period

-40.00

B.

Full Name (Last, First, Middle Initial)

Graves for Congress

Mailing Address 2345 Grand, Suite 2400

City Kansas City State MO Zip Code 64108

Purpose of Disbursement
Uncashed 11/3/08 Contribution

Candidate Name
Samuel B. Graves, Jr.

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MO District: 06

Transaction ID: ef3c8e3ef1116b4d50f

Date of Disbursement

04 / 16 / 2009

Amount of Each Disbursement this Period

-12.00

C.

Full Name (Last, First, Middle Initial)

Honeycutt for Congress 2006

Mailing Address 1155 - 15th Street, NW
Suite 410

City Washington State DC Zip Code 20005

Purpose of Disbursement
Uncashed 9/28/06 Contribution

Candidate Name
Deborah Travis T. Honeycutt

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: GA District: 13

Transaction ID: 62e364a9c09ad480b0c

Date of Disbursement

04 / 16 / 2009

Amount of Each Disbursement this Period

-150.00

Earmarked by Liviu Tomutsa

SUBTOTAL of Disbursements This Page (optional)

-202.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Honeycutt for Congress 2006	Transaction ID: 4ae53a899fdf14585f9 Date of Disbursement																				
Mailing Address 1155 - 15th Street, NW Suite 410	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	6		2	0	0	9												
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period																				
Purpose of Disbursement Uncashed 11/1/06 Contribution	<table border="1"> <tr> <td colspan="10">-1000.00</td> </tr> </table>	-1000.00																			
-1000.00																					
Candidate Name Deborah Travis T. Honeycutt	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: GA District: 13																					
B. Full Name (Last, First, Middle Initial) Jim Ryun for Congress	Transaction ID: f03ea8f0c327eac6ef5 Date of Disbursement																				
Mailing Address PO Box 826	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	6		2	0	0	9												
City Topeka State KS Zip Code 66601	Amount of Each Disbursement this Period																				
Purpose of Disbursement Uncashed 11/7/06 Contribution	<table border="1"> <tr> <td colspan="10">-15.00</td> </tr> </table>	-15.00																			
-15.00																					
Candidate Name James R. Ryun	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KS District: 02	Earmarked by Carroll Mueller																				
C. Full Name (Last, First, Middle Initial) Jim Ryun for Congress	Transaction ID: d9726bd50d0b7fa9e13 Date of Disbursement																				
Mailing Address PO Box 826	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	6		2	0	0	9												
City Topeka State KS Zip Code 66601	Amount of Each Disbursement this Period																				
Purpose of Disbursement Uncashed 10/9/08 Contribution	<table border="1"> <tr> <td colspan="10">-25.00</td> </tr> </table>	-25.00																			
-25.00																					
Candidate Name James R. Ryun	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KS District: 02																					

SUBTOTAL of Disbursements This Page (optional)

-1040.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Musgrave for Congress</p> <p>Mailing Address PO Box 1022 #211</p> <p>City Johnstown State CO Zip Code 80534</p> <p>Purpose of Disbursement Uncashed 11/6/06 Contribution</p> <p>Candidate Name Marilyn Musgrave</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CO District: 04</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 68c62b702e86da87abf</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period -75.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Musgrave for Congress</p> <p>Mailing Address PO Box 1022 #211</p> <p>City Johnstown State CO Zip Code 80534</p> <p>Purpose of Disbursement Uncashed 6/13/08 Contribution</p> <p>Candidate Name Marilyn Musgrave</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CO District: 04</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0518e62921e5e765d01</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period -1000.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Musgrave for Congress</p> <p>Mailing Address PO Box 1022 #211</p> <p>City Johnstown State CO Zip Code 80534</p> <p>Purpose of Disbursement Uncashed 7/9/08 Contribution</p> <p>Candidate Name Marilyn Musgrave</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CO District: 04</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 6bc0474fce74d420ee5</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period -85.00</p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p> <p>-1160.00</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Roskam for Congress Committee

Mailing Address PO Box 713

City Wheaton State IL Zip Code 60187

Purpose of Disbursement
Uncashed 6/12/06 Contribution

Candidate Name
Peter J. Roskam

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2006 ☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 06

Transaction ID: d6fc8f369afd5ab4dfb
Date of Disbursement

04 / 16 / 2009

Amount of Each Disbursement this Period

-32.00

B. Full Name (Last, First, Middle Initial)
Tom Feeney for Congress

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement
Uncashed 10/9/08 Contribution

Candidate Name
Tom Feeney

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 24

Transaction ID: 7048d0553f663d7b858
Date of Disbursement

04 / 16 / 2009

Amount of Each Disbursement this Period

-20.00

C. Full Name (Last, First, Middle Initial)
Virginia Foxx for Congress

Mailing Address PO Box 1100

City Clemmons State NC Zip Code 27012

Purpose of Disbursement
Uncashed 6/2/06 Contribution

Candidate Name
Virginia Foxx

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2006 ☐ Primary ☒ General
☐ Other (specify) ▼

State: NC District: 05

Transaction ID: eb2e490dab3231e0c4a
Date of Disbursement

04 / 16 / 2009

Amount of Each Disbursement this Period

-1.00

Earmarked by Walter O'Neil

SUBTOTAL of Disbursements This Page (optional)

-53.00

TOTAL This Period (last page this line number only)

625.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) John R. Brady	Transaction ID: 778535d67f7bcd66581 Date of Disbursement																				
Mailing Address 9616 Bonair Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	6		2	0	0	9												
City Manassas State VA Zip Code 20109-3351	Amount of Each Disbursement this Period																				
Purpose of Disbursement Uncashed 8/22/06 Check Candidate Name	<table border="1"> <tr> <td colspan="10">-5.00</td> </tr> </table>	-5.00																			
-5.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 010																					
B. Full Name (Last, First, Middle Initial) Hazel Dawson	Transaction ID: 27b8e3d426321ffa5da Date of Disbursement																				
Mailing Address 104 Grapeland Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	6		2	0	0	9												
City San Antonio State TX Zip Code 78214-2126	Amount of Each Disbursement this Period																				
Purpose of Disbursement Uncashed 7/24/08 Check Candidate Name	<table border="1"> <tr> <td colspan="10">-20.00</td> </tr> </table>	-20.00																			
-20.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 010																					
C. Full Name (Last, First, Middle Initial) Alan Fritz	Transaction ID: aab22c160b378809e49 Date of Disbursement																				
Mailing Address 1615 Northwest 9th Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	6		2	0	0	9												
City Grand Rapids State MN Zip Code 55744-2115	Amount of Each Disbursement this Period																				
Purpose of Disbursement Uncashed 7/24/08 Check Candidate Name	<table border="1"> <tr> <td colspan="10">-20.00</td> </tr> </table>	-20.00																			
-20.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 010																					

SUBTOTAL of Disbursements This Page (optional)

-45.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.

Full Name (Last, First, Middle Initial)

Billy Grimes

Mailing Address 4146-B Furman Drive

City	State	Zip Code
Mobile	AL	36619-8920

Purpose of Disbursement
Uncashed 7/24/08 Contribution

Candidate Name

010
Category/ Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 6fd6fb0e7cec109e3cf

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	0	9

Amount of Each Disbursement this Period

-50.00

B.

Full Name (Last, First, Middle Initial)

Carolyn P. Ingersoll

Mailing Address 713 Potomac Knolls Dr

City	State	Zip Code
Mc Lean	VA	22102-1421

Purpose of Disbursement
Uncashed 7/24/2008 Check

Candidate Name

010
Category/ Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 83f6c96e9d173750a77

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	0	9

Amount of Each Disbursement this Period

-100.00

C.

Full Name (Last, First, Middle Initial)

John F. Kilcoyne

Mailing Address 90 Beaman Road

City	State	Zip Code
Sterling	MA	01564-2701

Purpose of Disbursement
Uncashed 7/24/08 Check

Candidate Name

010
Category/ Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 1968ec852a4e7945c9c

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	0	9

Amount of Each Disbursement this Period

-35.00

SUBTOTAL of Disbursements This Page (optional)

-185.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☒ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.

Full Name (Last, First, Middle Initial)

Rudolph Mansi

Mailing Address 3933 FM 646 Rd. N

City
Santa Fe

State
TX

Zip Code
77510-6106

Purpose of Disbursement
Uncashed 8/22/06 Check

Candidate Name

010

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 44d29cc970d8a0ea177

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 0 9

Amount of Each Disbursement this Period

-1.00

B.

Full Name (Last, First, Middle Initial)

Don E. McHard

Mailing Address 3506 E Cheery Lynn Road

City
Phoenix

State
AZ

Zip Code
85018-6222

Purpose of Disbursement
Uncashed 8/22/06 Check

Candidate Name

010

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 7d16bccae6b962b1bd3

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 0 9

Amount of Each Disbursement this Period

-10.00

C.

Full Name (Last, First, Middle Initial)

Wilford A. Ott

Mailing Address 1765 Granview Drive

City
Reno

State
NV

Zip Code
89503-2460

Purpose of Disbursement

Candidate Name

010

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 1a2a45efd81cd7daba9

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 0 9

Amount of Each Disbursement this Period

-10.00

SUBTOTAL of Disbursements This Page (optional)

-21.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.

Full Name (Last, First, Middle Initial)

Rita M. Silveri

Mailing Address 1427 Thatcher Avenue

City
River Forest

State
IL

Zip Code
60305-1025

Purpose of Disbursement
Uncashed 8/29/06 Check

Candidate Name

010
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 04eb5c9ce67b8855809

Date of Disbursement

MM / DD / YYYY
04 / 16 / 2009

Amount of Each Disbursement this Period

-10.00

SUBTOTAL of Disbursements This Page (optional)

-10.00

TOTAL This Period (last page this line number only)

-261.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Accounting Adjustment</p> <p>Mailing Address 1800 North Kent Street Suite 1070</p> <p>City Alexandria State VA Zip Code 22209</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: V000eb4d095290ef14a9</p> <p>Date of Disbursement 01 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 99484.68</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Friends of Barbara Comstock</p> <p>Mailing Address 44 Canal Center Plaza</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 74635-9390527606010</p> <p>Date of Disbursement 02 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Tricia Stall for Senate</p> <p>Mailing Address 10368 Warwick Blvd</p> <p>City Newport News State VA Zip Code 23601</p> <p>Purpose of Disbursement Uncashed 8/15/07 Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: d76f7b51c07aa8db0fb</p> <p>Date of Disbursement 04 / 16 / 2009</p> <p>Amount of Each Disbursement this Period -865.00</p>

SUBTOTAL of Disbursements This Page (optional)

99619.68

TOTAL This Period (last page this line number only)

99619.68